

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H.S	J.C. 866	10/31/2000
RESPONSE FORMALITY REVIEW			

LAST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 -+ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	92-26-97
2	92-8-16-97
3	
4	✓ ✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓ ✓
17	✓
18	✓
19	✓
20	✓
21	✓
22	✓
23	✓
24	✓
25	✓ ✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	
Original	
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
58	✓
59	✓
60	✓
61	✓
62	✓
63	✓
64	✓
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66	✓
67	✓
68	✓
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Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions
staple additional sheet here